

McNair Scholars Program Annual Update Form

Name (include Maiden): _____ Date: _____

Current E-mail Address: _____ Phone# _____

Forwarding /Permanent Street Address: _____

City, State, Zip: _____

Are you currently attending Graduate School: Yes No Date 1st Enrolled _____ Yr. in Program: _____

If so, name of **University/College**: _____ **Department**: _____

What is your specific **program of study and degree**, i.e. Plant Genetics, PhD: _____

Are you receiving a Fellowship or Assistantship Yes No

List Title & Amount: _____

Have you completed your **Masters**: Yes No **Date of Completion or Expected Date**: _____

Name, City and State of University and College/Division/Dept: _____

Have you completed your **Ph.D.** : Yes No **Date of Completion or Expected Date**: _____

Name, City and State of University and College/Division/Dept: _____

Please list accomplishments, achievements, awards, prospects, or news since graduation from River Falls:

If you are not enrolled in Graduate School, what are you doing currently? List organization or company, title & location, or other involvement. Also inform us of marriage or new children

Are you in the process of applying to Graduate School? **Masters** Yes No **Ph.D.** Yes No

List schools: _____

Expected Enrollment Date _____

Plans for further study/career:

UW-River Falls Info:

Degree/Major _____ Graduation Date: _____ McNair Mentor: _____

Please Submit, Print, Mail or Email:

UW-River Falls McNair Scholars Program
Academic Success Center
105 Davee Library
410 S. Third St.
River Falls, WI 54022

Or submit as an attachment via e-mail to: mcnair.scholars.program@uwrf.edu

Received:

Initials: